



Healthcare inequalities following violence: analysis of the Crime Survey for England and Wales 2010-2023

Anastasia Fadeeva, Niels Blom, Sally McManus

City, St George's University of London

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Background

Many victims-survivors do or could benefit from healthcare support

Barriers to using healthcare exist

Health administrative data only allows learning about those victims-survivors who received healthcare

CSEW provides information about victims-survivors who did and did not receive medical help





Aim:

Address the evidence gap on inequalities in health care usage following violence victimisation

Objectives:

Measure how individual sociodemographic characteristics of victim-survivors and factors related to violence victimisation were associated with:

- a) the severity of injuries and
- b) receiving medical attention;

c) examine whether the severity of injuries moderated relationships between violencerelated and individual factors and receiving medical help.







Data

Collected between April 2010 and March 2024 (12 survey waves)

Adults aged 16 or over were asked about crime victimisation in the last 12 months

Up to six victim forms (VF) per participant





Measures

- Receiving medical help
- Injury (by severity)
- Victim-perpetrator relationships
- Number of perpetrators
- Weapon use
- Location
- Time of day
- Time of week
- Survey year

- Age (category)
- Gender
- Ethnicity
- Relationship status
- Education
- Employment status





Types of injury

Minor injury	Major injury
 minor bruising or black eye severe bruising scratches 	 stab wounds, broken/cracked/fractured bones nose bleed broken nose chipped/broken/lost teeth cuts puncture or stab wounds dislocation of joints concussion or loss of consciousness facial/head injuries eye or facial injuries caused by something being thrown in the face internal injuries other



Statistical analysis

- Descriptive analysis by the type of injury, unadjusted binary logistic regressions to test for differences;
- Multinomial logistic regressions to analyse the associations between injury severity and violence-related and sociodemographic factors;
- Logistic regression analyses to examine the associations between receiving medical care and injury, violence-related, and sociodemographic factors;
- Interactions between injury type and the other sociodemographic and violence indicators for receiving medical help.



Descriptive results



- 9,053 of VFs mentioned physical violence
- More men (58.6%) reported violence victimisation, of a younger age (49.7% <30 yo), single (53.1%)
- 31.5% resulted in a minor injury and 22.9% in a major injury
- 48.8% involved a stranger
- 32.7% involved an acquaintance
- 18.5% involved a domestic relation
- For two-thirds (69.6%), there was one assailant
- 51.7% of victims with major injuries received medical help
- White/White British people reported more minor than major injuries





Factors associated with major injuries following violence victimisation

		RRR	(95% CI)
Victim-perpetrator relationship	Domestic	2.264	(1.784–2.873)
(Ref.=Stranger or unknown)	Acquaintance	1.630	(1.378–1.928)
Single or multiple perpetrators			
Ref.=Single)	Multiple	1.726	(1.475–2.020)a
Weapon use (Ref.=No)	Yes	2.577	(2.144–3.096)a
Location (Ref.=Home)	Work	0.764	(0.591–0.988)a
	Recreation	1.665	(1.313–2.111)
Evening or night (Ref.=No)	Yes	1.201	(1.022–1.410)
Weekend (Ref.=No)	Yes	1.269	(1.090–1.477)
Gender (Ref.=Women)	Men	1.380	(1.186–1.607)a
Age (Ref.=20-29 years old)	16-19	0.612	(0.479–0.781)
	60-69	0.627	(0.412–0.954)
	70 and older	0.488	(0.261–0.910)
Education (Ref.=Higher)	A-Level and similar	0.809	(0.684–0.956)
	no or other	1.314	(1.037–1.665)
Relationship status	Single	1.712	(1.448–2.024)a
Ref.=Married or cohabitting)	Separated or Divorced	1.687	(1.358–2.097)a
Survey year		0.971	(0.952–0.990)

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Receiving medical support following violence victimisation

		AOR	(95% CI)
Injury (Ref.=Minor injury)	No injury		
		0.141	(0.105–0.191)
	Major injury	6.804	(5.712–8.105)
Single or multiple	Multiple		
perpetrators (Ref.=Single)			
		1.403	(1.163–1.693)
Weapon use (Ref.=No)	Yes	1.532	(1.263–1.858)
Location (Ref.=Home)	Work	1.899	(1.419–2.543)
Gender (Ref.=Women)	Men	0.766	(0.639–0.918)
Age (Ref.=20-29 years old)	70 and older		
		2.539	(1.355–4.759)
Ethnicity			
(Ref.= White/White British)	Asian/Asian British	1.709	(1.136–2.570)
Education (Ref.=Higher)	A-Level and similar	0.819	(0.675–0.994)
	Survey year	0.967	(0.944–0.989)



Receiving medical help by injury type



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Summary

Victims were more likely to be men, of a younger age, experienced violence from a stranger

Half of victims with major injuries did not receive medical attention

People who experienced violence in domestic relationships were at the highest risk of receiving injuries

Those in domestic relationships were also less likely to receive medical help for their major injuries

